



# Barre Park Shelter RENTAL AGREEMENT

I, the undersigned, am using the Town of Barre Park Shelter on  
(Date of Use) \_\_\_\_/\_\_\_\_/20\_\_\_\_ for a non-refundable, non-transferrable fee of \$75  
due within 5 business days of reserving the shelter. In addition, a REFUNDABLE  
deposit of \$75 is required to guarantee compliance with this agreement.

*Please keep a copy of this agreement for reference.*

### I DO HEREBY AGREE TO:

- 1) Be fully responsible for the shelter building and to pay for any damage to the shelter that occurs while I am using it.
- 2) Leave the kitchen area as clean as I found it.
- 3) Put picnic tables back in the shelter if I move them outside.
- 4) Always keep all pets under the control of the owner by means of a leash, chain or rope, and to clean up and dispose of all pet waste.
- 5) Keep all cooking fires in places specifically provided for such fires.
- 6) Place all refuse in the receptacles provided. **I AGREE TO TAKE ALL GARBAGE HOME WITH ME.**
- 7) Abide by the closing hour of the park; which is 10pm
- 8) Use only the designated entrance for coming into and leaving the park and restrict all parking to the parking lot.
- 9) I understand shelter reservations do not entitle the holder to exclusive use of any other portion of the park.
- 10) Send two separate checks for \$75 each (you will receive the \$75 damage deposit back in the mail after rental property is inspected and no damage is found).**

**PAYABLE TO: Town of Barre**

**MAIL TO: Meri McKinney W4194 County Road O, LaCrosse, WI 54601**

IN CASE OF EMERGENCY OR ISSUE WITH THE SHELTER, CONTACT:  
Curt Berg (608-386-3336) or Bob Miller (608-786-2040) or John McGowan (608) 786-1199

Print Name _____	Phone (____) _____ - _____
Company/Group Name _____	
Email _____	Hours of Rental _____ to _____
Address _____	
Signature: _____	Date: ____/____/20____

### ----- FOR OFFICE USE ONLY -----

Date Form/Checks Received: \_\_\_\_/\_\_\_\_/20\_\_\_\_ Fee Check # \_\_\_\_\_ \$75.00 & Deposit Check # \_\_\_\_\_ \$75.00  
 Damage? Describe: \_\_\_\_\_ Damage Fee \$ \_\_\_\_\_  
 Date Fee Deposited: \_\_\_\_/\_\_\_\_/20\_\_\_\_ Check #: \_\_\_\_\_ by \_\_\_\_\_, Town Treasurer